

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket	1134-202	
		First Named Inventor	Lathan	
		COMPLETE IF KNOWN		
		Application Number		
		Filing Date	February 27, 2002	
Declaration Submitted with Initial Filing	OR	Declaration Submitted after Initial filing (surcharge (37 CFR 1.16(e)) Required)	Group Art Unit	
			Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Robotic Apparatus and Wireless Communication System

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United states provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/271,765	February 27, 2001	Additional provisional application Numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number 30011
OR
Registered practitioner(s) name/registration number listed below



PATENT & TRADEMARK OFFICE

Name	Registration Number	Name	Registration Number
Rochelle Lieberman, Esq.	39,276		

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number 30011 OR Correspondence address below

Name	Lieberman & Brandsdorfer, LLC						
Address	12221 McDonald Chapel Drive						
Address							
City	Gaithersburg	State	MD	Zip	20878-2252		
Country	United States of America	Telephone	301-948-7775		Fax	301-948-7774	


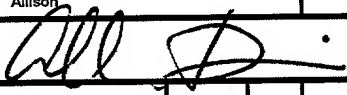
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Corinna E.				Lathan			
Inventor's Signature						Date	2/26/02
Residence: City	Wheaton	State	MD	Country	USA	Citizenship	USA
Post Office Address	2112 Cascade Road						
Post Office Address							
City	Wheaton	State	MD	Zip	20902	Country	USA

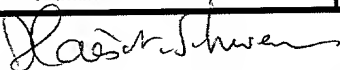
Additional inventors are being named on the 2 Supplemental Additional Inventor(s) sheet(s) PTO/SB/02A Attached hereto.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> Of <u>4</u>
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Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Michael R.				Tracey			
Inventor's Signature						Date	
Residence: City	Hillsborough	State	NJ	Country	USA	Citizenship	USA
Post Office Address	36 Independence Drive						
Post Office Address							
City	Hillsborough	State	NJ	Zip	08844	Country	USA
Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Jack M.				Vice			
Inventor's Signature						Date	
Residence: City	Glenndale	State	MD	Country	USA	Citizenship	USA
Post Office Address	10711 N. Lansdale Street						
Post Office Address							
City	Glenndale	State	MD	Zip	20769	Country	USA
Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Allison				Druin			
Inventor's Signature						Date	2/26/02
Residence: City	Hyattsville	State	MD	Country	USA	Citizenship	USA
Post Office Address	4106 Clagett Street						
Post Office Address							
City	Hyattsville	State	MD	Zip	20782	Country	USA

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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>4</u> Of <u>4</u>					
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])					Family Name or Surname										
Catherine					Plaisant										
Inventor's Signature										Date		2-26-0			
Residence: City		University Park		State		MD		Country		USA		Citizenship		France	
Post Office Address		6514 41 st Avenue													
Post Office Address															
City		University Park		State		MD		Zip		20782		Country		USA	
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])					Family Name or Surname										
Inventor's Signature										Date					
Residence: City				State				Country				Citizenship			
Post Office Address															
Post Office Address															
City				State				Zip				Country			
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])					Family Name or Surname										
Inventor's Signature										Date					
Residence: City				State				Country				Citizenship			
Post Office Address															
Post Office Address															
City				State				Zip				Country			
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])					Family Name or Surname										
Inventor's Signature										Date					
Residence: City				State				Country				Citizenship			
Post Office Address															
Post Office Address															
City				State				Zip				Country			

Supplemental Additional Inventor(s) Sheet PTO/SB02A (3/97)

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 Of 4			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Michael R.				Tracey			
Inventor's Signature				Date	2/27/02		
Residence: City	Branchburg Hillsborough	State	NJ	Country	USA		Citizenship
Post Office Address	36 Independence Drive 403 KACEY CRT						
Post Office Address							
City	Branchburg Hillsborough	State	NJ	Zip	08876	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Jack M.				Vice			
Inventor's Signature				Date			
Residence: City	Glenndale	State	MD	Country	USA		Citizenship
Post Office Address	18711 N. Lanedale Street						
Post Office Address							
City	Glenndale	State	MD	Zip	20769	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Allison				Druin			
Inventor's Signature				Date			
Residence: City	Hyattsville	State	MD	Country	USA		Citizenship
Post Office Address	4106 Clagett Street						
Post Office Address							
City	Hyattsville	State	MD	Zip	20782	Country	USA

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